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Fill in this information to identify your case:

Debtor 1	Pierre Brookins	
	First Name	Middle Name
Debtor 2		
(Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the: District of Arizona		
Case number (if known)	1710271	

FILED USBC CLRK PHX  
2017 SEP 7 AM 11:39

Check if this is an  
amended filing

## Official Form 106E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
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2.1	Arizona Department of Revenue	Priority Creditor's Name	Last 4 digits of account number	\$	300.00	\$	300.00	\$
	1600 W Monroe St	Number Street						
	Phoenix	AZ	85007	City	State	ZIP Code		
	Who incurred the debt? Check one.							
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another							
	<input type="checkbox"/> Check if this claim is for a community debt							
	Is the claim subject to offset?							
	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes							
2.2	Priority Creditor's Name	Number Street	Last 4 digits of account number	\$	\$	\$	\$	\$
	City	State	ZIP Code					
	Who incurred the debt? Check one.							
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another							
	<input type="checkbox"/> Check if this claim is for a community debt							
	Is the claim subject to offset?							
	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes							

**Part 1: Your PRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Total claim	Priority amount	Nonpriority amount	
<input type="checkbox"/>	Department of Treasury Priority Creditor's Name Internal Revenue Service Number _____ Street _____	Last 4 digits of account number _____	\$ 10,000.00	\$ 10,000.00	
	Fresno CA 93888 City State ZIP Code	When was the debt incurred? _____			
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply.			
	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of PRIORITY unsecured claim:			
	Is the claim subject to offset?	<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			
<input type="checkbox"/>	Priority Creditor's Name Number _____ Street _____	Last 4 digits of account number _____	\$ _____	\$ _____	\$ _____
	City State ZIP Code	When was the debt incurred? _____			
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply.			
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of PRIORITY unsecured claim:			
	Is the claim subject to offset?	<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			
<input type="checkbox"/>	Priority Creditor's Name Number _____ Street _____	Last 4 digits of account number _____	\$ _____	\$ _____	\$ _____
	City State ZIP Code	When was the debt incurred? _____			
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply.			
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
	<input type="checkbox"/> Check if this claim is for a community debt	Type of PRIORITY unsecured claim:			
	Is the claim subject to offset?	<input type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify _____			

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.**

4.1 **City of Chicago**  
 Nonpriority Creditor's Name  
**121 N Lasalle**  
 Number Street  
**Chicago** **IL** **60602**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_ \$ **2,000.00**

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.2 **Navient**  
 Nonpriority Creditor's Name  
**P.O. Box 9533**  
 Number Street  
**Wilkes-Barre** **PA** **18773**  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_ \$ **97,000.00**

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.3 **Nonpriority Creditor's Name**  
 Number Street  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_ \$ \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim	
4.1	Cardiovascular Associates of Mesa			Last 4 digits of account number _____ \$ 115.00
Nonpriority Creditor's Name P.O. Box 29900 Dept 946			When was the debt incurred? _____	
Number Street Phoenix Az 85038			As of the date you file, the claim is: Check all that apply.	
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Who incurred the debt? Check one.			Type of NONPRIORITY unsecured claim:	
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input type="checkbox"/> No <input type="checkbox"/> Yes				
4.2	Banfield Pet Hospital			Last 4 digits of account number _____ \$ 1,000.00
Nonpriority Creditor's Name 4380 N Miller Rd			When was the debt incurred? _____	
Number Street Scottsdale Az 85251			As of the date you file, the claim is: Check all that apply.	
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Who incurred the debt? Check one.			Type of NONPRIORITY unsecured claim:	
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input type="checkbox"/> No <input type="checkbox"/> Yes				
4.3	Regional Acceptance Corporation			Last 4 digits of account number _____ \$ 10,000.00
Nonpriority Creditor's Name P.O. Box 580075			When was the debt incurred? _____	
Number Street Charlotte Az 28258			As of the date you file, the claim is: Check all that apply.	
			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Who incurred the debt? Check one.			Type of NONPRIORITY unsecured claim:	
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
<input type="checkbox"/> Check if this claim is for a community debt				
Is the claim subject to offset?				
<input type="checkbox"/> No <input type="checkbox"/> Yes				

Debtor 1

First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<input type="checkbox"/>	Credit Security Acceptance Corporation Nonpriority Creditor's Name P.O. Box 1310 Number Street Mesa AZ 85211 City State ZIP Code	Last 4 digits of account number _____	<b>\$ 10,000.00</b>
<p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>		<p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input type="checkbox"/> Other. Specify _____</p>	
<input type="checkbox"/>		<p>Last 4 digits of account number _____</p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input type="checkbox"/> Other. Specify _____</p>	
<input type="checkbox"/>		<p>Last 4 digits of account number _____</p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input type="checkbox"/> Other. Specify _____</p>	

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.**

			<b>Total claim</b>	
4.1	<b>Conns</b> Nonpriority Creditor's Name <b>3295 College St</b> Number Street <b>Beaumont</b> <b>TX</b> <b>77701</b> City State ZIP Code			Last 4 digits of account number <b>_____</b> \$ <b>6,000.00</b> When was the debt incurred? _____
				<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
				<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____
				Last 4 digits of account number <b>_____</b> \$ <b>2,000.00</b> When was the debt incurred? _____
4.2	<b>J P Morgan Chase</b> Nonpriority Creditor's Name <b>10 S Dearborn</b> Number Street <b>Chicago</b> <b>IL</b> <b>60603</b> City State ZIP Code			<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
				<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____
4.3	<b>US Bank</b> Nonpriority Creditor's Name <b>800 N Nicollet Mall</b> Number Street <b>Minneapolis</b> <b>MN</b> <b>55402</b> City State ZIP Code			Last 4 digits of account number <b>_____</b> \$ <b>1,000.00</b> When was the debt incurred? _____
				<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
				<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

**Bank of America**  
 Nonpriority Creditor's Name  
**100 N Tryon**  
 Number  Street   
**Charlotte**  **NC**  **28255**  
 City  State  ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

**Last 4 digits of account number**

\$ **1,000.00**

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify

**TCF Bank**  
 Nonpriority Creditor's Name  
**200 Lake St E # 200**  
 Number  Street   
**Wazata**  **MN**  **55391**  
 City  State  ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

**Last 4 digits of account number**

\$ **1,000.00**

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify

**Devon Financial**  
 Nonpriority Creditor's Name  
**22 E Adams**  
 Number  Street   
**Chicago**  **IL**  **60603**  
 City  State  ZIP Code

**Who incurred the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Check if this claim is for a community debt**

**Is the claim subject to offset?**

No  
 Yes

**Last 4 digits of account number**

\$ **1,500.00**

**When was the debt incurred?**

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.**

4.1 **Freeway Insurance**  
 Nonpriority Creditor's Name  
 3536 W Baseline Dr  
 Number Street  
 Phoenix AZ 85041  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

\$ 1,300.00

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.2 **Capital One Credit**  
 Nonpriority Creditor's Name  
 P.O. Box 60599  
 Number Street  
 City of Industry CA 91716  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

\$ 4,500.00

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.3 **Commonwealth Financial Systems**  
 Nonpriority Creditor's Name  
 245 Main St  
 Number Street  
 Dickson City PA 18519  
 City State ZIP Code

Last 4 digits of account number \_\_\_\_\_

\$ 1,200.00

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

		Total claim
<input type="checkbox"/> Page Family Practice	Nonpriority Creditor's Name P.O. Box 15070 Number Street Scottsdale AZ 85267 City State ZIP Code	Last 4 digits of account number _____ \$ <u>500.00</u>
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>		
<input type="checkbox"/> First National Collection Bureau/ Direct TV	Nonpriority Creditor's Name 610 Waltham Number Street Sparks NV 89434 City State ZIP Code	Last 4 digits of account number _____ \$ <u>1,000.00</u>
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>		
<input type="checkbox"/> Direct TV	Nonpriority Creditor's Name P.O. Box 78626 Number Street Scottsdale AZ 85062 City State ZIP Code	Last 4 digits of account number _____ \$ <u>1,000.00</u>
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>		

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.**

			<b>Total claim</b>
4.1	RSI Enterprise Inc/ Sonora Quest Laboratories		
Nonpriority Creditor's Name			Last 4 digits of account number _____ \$ _____
P.O. Box 16190			When was the debt incurred? _____
Number Street			
Phoenix AZ 85011			As of the date you file, the claim is: Check all that apply.
City State ZIP Code			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Who incurred the debt? Check one.			<b>Type of NONPRIORITY unsecured claim:</b>
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input type="checkbox"/> No <input type="checkbox"/> Yes			
4.2	Credit One Bank		
Nonpriority Creditor's Name			Last 4 digits of account number _____ \$ _____
P.O. Box 98878			When was the debt incurred? _____
Number Street			
Las Vegas NV 89193			As of the date you file, the claim is: Check all that apply.
City State ZIP Code			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Who incurred the debt? Check one.			<b>Type of NONPRIORITY unsecured claim:</b>
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input type="checkbox"/> No <input type="checkbox"/> Yes			
4.3	Chandler Radiology Associates		
Nonpriority Creditor's Name			Last 4 digits of account number _____ \$ _____
P.O. Box 15638			When was the debt incurred? _____
Number Street			
Scottsdale AZ 85267			As of the date you file, the claim is: Check all that apply.
City State ZIP Code			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
Who incurred the debt? Check one.			<b>Type of NONPRIORITY unsecured claim:</b>
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____
<input type="checkbox"/> Check if this claim is for a community debt			
Is the claim subject to offset?			
<input type="checkbox"/> No <input type="checkbox"/> Yes			

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

		<b>Total claim</b>
<input type="checkbox"/> <b>Fingerhut</b> Nonpriority Creditor's Name 6250 Ridgewood Rd Number <input type="text"/> Street <input type="text"/> St. Cloud <input type="text"/> MN <input type="text"/> 56303 City <input type="text"/> State <input type="text"/> ZIP Code <input type="text"/>	Last 4 digits of account number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> \$ <input type="text"/>	180.00
<p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>		
<p><b>When was the debt incurred?</b> <input type="text"/></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input type="checkbox"/> Other. Specify <input type="text"/></p>		
<input type="checkbox"/> <b>Aspen National Collections</b> Nonpriority Creditor's Name P.O. Box 10689 Number <input type="text"/> Street <input type="text"/> Brooksville <input type="text"/> FL <input type="text"/> 34603 City <input type="text"/> State <input type="text"/> ZIP Code <input type="text"/>	Last 4 digits of account number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> \$ <input type="text"/>	600.00
<p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>		
<p><b>When was the debt incurred?</b> <input type="text"/></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input type="checkbox"/> Other. Specify <input type="text"/></p>		
<input type="checkbox"/> <b>Dignity Health / Chandler Regional Med Center</b> Nonpriority Creditor's Name 185 Berry St Ste 3000 Number <input type="text"/> Street <input type="text"/> Los Angeles <input type="text"/> CA <input type="text"/> 90074 City <input type="text"/> State <input type="text"/> ZIP Code <input type="text"/>	Last 4 digits of account number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> \$ <input type="text"/>	800.00
<p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>		
<p><b>When was the debt incurred?</b> <input type="text"/></p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input type="checkbox"/> Other. Specify <input type="text"/></p>		

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

**Total claim**

<p><input type="checkbox"/> <b>Sallie Mae</b>          Nonpriority Creditor's Name          P.O. Box 9500          Number Street          Wilkes Barre PA 18773          City State ZIP Code</p> <p><b>Who incurred the debt? Check one.</b></p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> _____ <b>\$ 97,000.00</b></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input checked="" type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input type="checkbox"/> Other. Specify _____</p>
<p><input type="checkbox"/> <b>Northwest Collections</b>          Nonpriority Creditor's Name          3601 Algonquin Rd          Number Street          Rolling Meadows IL 60008          City State ZIP Code</p> <p><b>Who incurred the debt? Check one.</b></p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> _____ <b>\$ 180.00</b></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input type="checkbox"/> Other. Specify _____</p>
<p><input type="checkbox"/> <b>US Collections West Inc c/o Mission Springs Apts</b>          Nonpriority Creditor's Name          P.O. Box 39695          Number Street          Phoenix AZ 85069          City State ZIP Code</p> <p><b>Who incurred the debt? Check one.</b></p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p><b>Last 4 digits of account number</b> _____ <b>\$ 2,599.00</b></p> <p><b>When was the debt incurred?</b> _____</p> <p><b>As of the date you file, the claim is:</b> Check all that apply.</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input type="checkbox"/> Other. Specify _____</p>

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.**

4.1 U of I SFSCO  
 Nonpriority Creditor's Name  
 2505 S Finley  
 Number Street  
 Lombard IL 60148  
 City State ZIP Code

**Who incurred the debt? Check one.**

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Check if this claim is for a community debt

**Is the claim subject to offset?**

No  
 Yes

Last 4 digits of account number \_\_\_\_\_

**Total claim** \$ 9,061.00

When was the debt incurred? \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.2 Aarons  
 Nonpriority Creditor's Name  
 1724 R T Dunn Dr  
 Number Street  
 Bloomington IL  
 City State ZIP Code

**Who incurred the debt? Check one.**

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Check if this claim is for a community debt

**Is the claim subject to offset?**

No  
 Yes

Last 4 digits of account number \_\_\_\_\_

\$ 3,500.00

When was the debt incurred? \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.3 Progressive  
 Nonpriority Creditor's Name  
 256 W Data Dr  
 Number Street  
 Draper UT 84020  
 City State ZIP Code

**Who incurred the debt? Check one.**

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Check if this claim is for a community debt

**Is the claim subject to offset?**

No  
 Yes

Last 4 digits of account number \_\_\_\_\_

\$ 1,500.00

When was the debt incurred? \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.**

			Total claim
4.1	Credit Collection Services Nonpriority Creditor's Name Two Wells Ave Number Street Newton MA 02459 City State ZIP Code	Last 4 digits of account number	\$ 500.00
			When was the debt incurred?
As of the date you file, the claim is: Check all that apply.			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
4.2	NCC Nonpriority Creditor's Name 245 Main St Number Street Dickson City PA 18519 City State ZIP Code	Last 4 digits of account number	\$ 700.00
			When was the debt incurred?
As of the date you file, the claim is: Check all that apply.			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			
4.3	PGAC Nonpriority Creditor's Name P.O. Box 305076 Number Street Nashville TN 37230 City State ZIP Code	Last 4 digits of account number	\$ 1,300.00
			When was the debt incurred?
As of the date you file, the claim is: Check all that apply.			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____			

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

		<b>Total claim</b>
<input type="checkbox"/>	<b>Capital One Auto</b> Nonpriority Creditor's Name P.O.Box 60511 Number Street City of Industry CA 91716 City State ZIP Code	Last 4 digits of account number _____ \$ <b>18,000.00</b>
<p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>		
<input type="checkbox"/>	<b>Linebarger Goggan Blair &amp; Sampson LLP</b> Nonpriority Creditor's Name P.O. Box 06152 Number Street Chicago IL 60606 City State ZIP Code	Last 4 digits of account number _____ \$ <b>2,000.00</b>
<p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>		
<input type="checkbox"/>	<b>Verizon</b> Nonpriority Creditor's Name P.O. Box 4005 Number Street Acworth GA 30101 City State ZIP Code	Last 4 digits of account number _____ \$ <b>2,000.00</b>
<p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>		

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.**

		<b>Total claim</b>
<b>4.1</b>	<b>National Credit Sytems</b> <small>Nonpriority Creditor's Name</small> <b>P.O. Box 312125</b> <small>Number Street</small> <b>Atlanta</b> <b>GA</b> <b>31131</b> <small>City</small> <small>State</small> <small>ZIP Code</small>	<b>Last 4 digits of account number</b> <b>_____</b> <b>\$</b> <b>3,000.00</b> <b>When was the debt incurred?</b> <b>_____</b>  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify <b>_____</b>
<b>4.2</b>	<b>Cox Communication</b> <small>Nonpriority Creditor's Name</small> <b>P.O. Box 78071</b> <small>Number Street</small> <b>Phoenix</b> <b>85062</b> <b>85072</b> <small>City</small> <small>State</small> <small>ZIP Code</small>	<b>Last 4 digits of account number</b> <b>_____</b> <b>\$</b> <b>1,000.00</b> <b>When was the debt incurred?</b> <b>_____</b>  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify <b>_____</b>
<b>4.3</b>	<b>Gerald E Moore &amp; Associates Sierra Goldman Sachs</b> <small>Nonpriority Creditor's Name</small> <b>P.O. Box 312057</b> <small>Number Street</small> <b>Atlanta</b> <b>GA</b> <b>31131</b> <small>City</small> <small>State</small> <small>ZIP Code</small>	<b>Last 4 digits of account number</b> <b>_____</b> <b>\$</b> <b>3,000.00</b> <b>When was the debt incurred?</b> <b>_____</b>  <b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify <b>_____</b>

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.			Total claim
<input type="checkbox"/>	Western General insurance Nonpriority Creditor's Name 5230 Las Virgenes Rd Number Street Calabasas CA 91302 City State ZIP Code	Last 4 digits of account number _____	\$ 1,000.00
<p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>			
<input type="checkbox"/>	Grandview Nonpriority Creditor's Name P.O Box 150 Number Street Scottsdale AZ 85252 City State ZIP Code	Last 4 digits of account number _____	\$ 1,000.00
<p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>			
<input type="checkbox"/>	Geico Nonpriority Creditor's Name 5260 Western Ave Number Street Chevy Chase MD 20815 City State ZIP Code	Last 4 digits of account number _____	\$ 500.00
<p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No  <input type="checkbox"/> Yes</p>			

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.**

			<b>Total claim</b>
<b>4.1</b>	<b>APS</b>		
Nonpriority Creditor's Name <b>P.O. Box 53922</b>			Last 4 digits of account number <b>_____</b> \$ <b>400.00</b>
Number Street <b>Phoenix</b> <b>Az</b> <b>85072</b>			When was the debt incurred? <b>_____</b>
City State ZIP Code			As of the date you file, the claim is: Check all that apply.
<b>Who incurred the debt? Check one.</b> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Check if this claim is for a community debt</b> <input type="checkbox"/>			<b>Type of NONPRIORITY unsecured claim:</b>
<b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify <b>_____</b>
<b>4.2</b>	<b>SRP</b>		Last 4 digits of account number <b>_____</b> \$ <b>300.00</b>
Nonpriority Creditor's Name <b>P.O. Box 52025</b>			When was the debt incurred? <b>_____</b>
Number Street <b>Phoenix</b> <b>AZ</b> <b>85072</b>			As of the date you file, the claim is: Check all that apply.
<b>Who incurred the debt? Check one.</b> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Check if this claim is for a community debt</b> <input type="checkbox"/>			<b>Type of NONPRIORITY unsecured claim:</b>
<b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify <b>_____</b>
<b>4.3</b>	<b>Enterprise</b>		Last 4 digits of account number <b>_____</b> \$ <b>400.00</b>
Nonpriority Creditor's Name <b>1206 S Veterans Pkwy</b>			When was the debt incurred? <b>_____</b>
Number Street <b>Bloomington</b> <b>IL</b> <b>61704</b>			As of the date you file, the claim is: Check all that apply.
<b>Who incurred the debt? Check one.</b> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Check if this claim is for a community debt</b> <input type="checkbox"/>			<b>Type of NONPRIORITY unsecured claim:</b>
<b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes			<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify <b>_____</b>

**Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

		Total claim
<input type="checkbox"/>	<b>Eldorado Resorts Corporation</b> Nonpriority Creditor's Name 2700 162nd SW Suite # 300 Number Street Lynwood WA 98087 City State ZIP Code	Last 4 digits of account number _____ \$ 30,000.00
<b>Who incurred the debt? Check one.</b> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<b>Check if this claim is for a community debt</b> <input type="checkbox"/>		
<b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		
<input type="checkbox"/>	<b>Grandview</b> Nonpriority Creditor's Name P.O Box 150 Number Street Scottsdale AZ 85252 City State ZIP Code	Last 4 digits of account number _____ \$ 1,000.00
<b>Who incurred the debt? Check one.</b> <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<b>Check if this claim is for a community debt</b> <input type="checkbox"/>		
<b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		
<input type="checkbox"/>	Nonpriority Creditor's Name Number Street City State ZIP Code	Last 4 digits of account number _____ \$ _____
<b>Who incurred the debt? Check one.</b> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<b>Check if this claim is for a community debt</b> <input type="checkbox"/>		
<b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		

Debtor 1

First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.**

4.1	Illinois Lending Corporation Nonpriority Creditor's Name 724 W Washington Blvd Number Street Chicago IL 60061 City State ZIP Code	Total claim
	Last 4 digits of account number _____	\$ 1,500.00
	When was the debt incurred? _____	
	As of the date you file, the claim is: Check all that apply.	
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
4.2	Cash Time Nonpriority Creditor's Name 1160 E Van Buren St Number Street Phoenix AZ 85006 City State ZIP Code	\$ 2,000.00
	Last 4 digits of account number _____	\$ 2,000.00
	When was the debt incurred? _____	
	As of the date you file, the claim is: Check all that apply.	
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	
4.3	Speedy Cash Nonpriority Creditor's Name 1941 W Northern Ave Number Street Phoenix AZ 85021 City State ZIP Code	\$ 1,500.00
	Last 4 digits of account number _____	\$ 1,500.00
	When was the debt incurred? _____	
	As of the date you file, the claim is: Check all that apply.	
	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Type of NONPRIORITY unsecured claim:	
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input type="checkbox"/> Other. Specify _____	

Debtor 1

First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street \_\_\_\_\_

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City State ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street \_\_\_\_\_

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City State ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street \_\_\_\_\_

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City State ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street \_\_\_\_\_

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City State ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street \_\_\_\_\_

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City State ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street \_\_\_\_\_

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City State ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Name \_\_\_\_\_

On which entry in Part 1 or Part 2 did you list the original creditor?

Number Street \_\_\_\_\_

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

City State ZIP Code \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.  
Add the amounts for each type of unsecured claim.

**Total claims  
from Part 1**

6a. Domestic support obligations  
6b. Taxes and certain other debts you owe the government  
6c. Claims for death or personal injury while you were intoxicated  
6d. Other. Add all other priority unsecured claims.  
Write that amount here.

**Total claim**

6a. \$ 0  
6b. \$ 10,300  
6c. \$ 0  
6d. + \$ 0

6e.

**Total**  
Add lines 6a through 6d.  
\$ 10,300.00

**Total claims  
from Part 2**

6f. Student loans  
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
6h. Debts to pension or profit-sharing plans, and other similar debts  
6i. Other. Add all other nonpriority unsecured claims.  
Write that amount here.

**Total claim**

6f. \$ 97,000.00  
6g. \$ \_\_\_\_\_  
6h. \$ \_\_\_\_\_  
6i. + \$ 137,235.00

6j.

**Total**  
Add lines 6f through 6i.  
\$ 234,235.00

# \* Added Creditors

Conns	Capital One Credit
3295 College St	P.O. Box 60599
Beaumont TX 77701	City of Industry CA 91716
JP Morgan Chase	Commonwealth Financial Systems
10 S Dearborn	245 Main St
Chicago IL 60603	Dickson City PA 18519
US Bank	Page Family Practice
800 N Nicolett Mall	P.O. Box 15070
Minneapolis MN 55402	Scottsdale AZ 85267
Bank of America	First Nation Collection Vureau/ Direct TV
100 N Tyron	610 Waltham
Charlotte NC 28255	Sparks NV 89434
TCF Bank	Direct TV
200 Lake St E # 200	P.O. Box 78626
Wazata MN 55391	Scottsdale AZ 85062
Devon Financial	RSE Enterprise Inc/ Sonora Quest Laboratories
22 E Adams	P,O, Box 16190
Chicago IL 60606	Phoenix Az 85011
Freeway Insurance	Credit One Bank
3536 W Baseline Dr	P.O. Box 98878
Phoenix AZ 85041	Las Vegas Nevada

Chandler Radiology Associates  
P.O. Box 15638  
Scottsdale AZ 85267

Credit Security Acceptance Corporation  
P.O. Box 1310  
Mesa AZ 85211

Fingerhut  
6250 Ridgewood Rd  
St Cloud MN 56303

Planet Fitness  
26 Fox Run Rd  
Newington NH 03801

Aspen National Collections  
P.O. 10689  
Brookville FL 34603

Sprint  
1340 Churn Creek Rd  
Redding CA 96003

Dignity Health / Chandler Regional Medical Center  
185 Berry St Suite 3000  
Los Angeles CA 90074

Illinois Lending Corporation  
724 W Washington Blvd  
Chicago IL 60061

Cardiovascular Associates of Mesa  
P.O. Box 299 Dept 946  
Phoenix AZ 85038

Cash Time  
1160 E Van Buren St  
Phoenix AZ 85006

Banfield Pet Hospital  
4380 N Miller Rd  
Scottsdale AZ 85251

Speedy Cash  
1941 W Northern Ave  
Phoenix AZ 85021

Regional Acceptance Corporation  
P.O. Box 580075  
Charlotte NC 28258

Sallie Mae  
P.O. Box 9500  
Wilkes Barre PA 18773

*x*

Northwest Collections 3601 Algonquin Rd Rolling Meadows IL 60008	Dicksn City PA 18159 PGAC P.O. Box 305076
US Collection West Inc c/o Mission Springs Apts P.O. Box 39695 Phoenix AZ 85069	Nashville TN 37230 Capital One Auto P.O. Box 60511
Department of Treasury Internal Revenue Service Fresno CA 93888	City of Industry CA 91716 Linebarger Gogan Blair & Sampson LLP P.O. Box 06152
U of I SFSCO 2505 Finley Lombard IL 60148	Chicago IL 60606 Verizon P.O. Box 4005
Aarons 1724 R T Dunn Dr Bloomington IL 61701	Acworth GA 30101 National Credit Systems P.O. Box 312125
Progressive 256 W Data Dr Draper UT 84020	Atlanta GA 31131 Cox Communication P.O. Box 78071
Credit Collection Services Two Wells Ave Newton MA 02459	Phoenix Az 85062 Gerals E Moore & Associates Sierra Goldman Sachs
NCC 245 Main St	P.O. Box 312057 Atlanta GA 31131

Western General Insurance

5230 Las Virgenes

Calabasas CA 91302

Grandview

P.O. Box 150

Scottsdale AZ 85252

Geico

5260 Western Ave

Chevy Chase MD 20815

 City of Chicago

100 W Randolph St

Chicago IL 60601

 Arizona Department of Revenue

1600 W Monroe St

Phoenix AZ 85007

 Navient

US Department of Education Loan Servicing

P.O. Box 74035

Atlanta GA 30374